

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		1				
4	1					
5	1					
6		1		1		
7		1				
8	1	1	1			
9		1		1		
10		1		1		
11		1		1		
12		1		1		
13		1		1		
14		1		1		
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50						
TOTAL IND.	2		2			
TOTAL DEP.	12		12			
TOTAL CLAIMS	14		14			

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS